

MEMORANDUM

TO: BCI AUDITING/TRAINING STAFF

FROM: _____

DATE: _____

RE: 2010 TAC TRAINING

This is to verify the training given in the 2010 TAC meeting has been completed at our agency.

Training Date(s) _____

Hours _____ Style _____

Employees Trained:

NAME

TITLE

(Use reverse side for additional names.)

All subjects on the TAC lesson plan were covered:

YES _____

NO _____

EXPLAIN: _____

Any special attention notes are on the reverse side.

Signature

Title